



PERMANENT COSMETICS MAY NOT BE FOR YOU IF...

- Pregnant or Nursing
- Those prone to keloid scarring or post-inflammatory hypo pigmentation.
- Diabetes (will need medical clearance)
- A history of MRSA in the last 6 months.
- If you have a transmittable blood disease such as HIV or Hepatitis.
- Abnormal Heart Condition (will need medical clearance)
- Patients undergoing Chemotherapy
- You have any kind of skin condition on or near your eyebrows, eyelids or lips. This includes eczema, shingles, rashes, sunburn, psoriasis or anything else.
- Very Oily Skin
- Taking Accutane (need to be off for at least one year)
- Taking blood thinners such as Aspirin, Ibuprofen, Coumadin etc.
- Allergic reaction to rubbing alcohol or numbing agents
- Those with dark pre-existing permanent makeup.
- Those under the age of 18 years old.
- Taking sun sensitizing medications including but not limited to Retinol, Retin-A, vitamin A. These need to be stopped at least 2 weeks prior to procedure.
- Botox within the last 2 week
- Auto-immune deficiencies
- Severe acne
- Using lash growth serums (must be discontinued 6 weeks prior)
- Using glaucoma medication
- Conditions that cause very easy bleeding

Client Medical History Form

Name_____ Date_____

Address_____

Phone_____ Email_____

Emergency Contact_____ Phone_____

*Do you have or previously had any of the following:
(Circle YES or NO)

YES NO History of MRSA

YES NO Botox (Last treatment_____)

YES NO Diabetes

YES NO Blepharoplasty (Eyelid surgery)

YES NO Hepatitis A B C D

YES NO Forehead/Brow Lift

YES NO Easy Bleeding

YES NO Facelift

YES NO Alcoholism

YES NO Abnormal Heart Condition

YES NO Eye Surgery/Injury/Corneal Abrasion

YES NO Chemical Peel (Last Treatment_____)

YES NO Currently Pregnant or Breastfeeding

YES NO Brow or Lash Tinting

YES NO Autoimmune disorder

YES NO Oily Skin

YES NO Cancer (Year_____)

YES NO Accutane or acne treatment

YES NO Contact Lenses

YES NO Chemotherapy/ Radiation

YES NO Tan by booth or sun

YES NO Do you use skin care products containing Retin-A,
Glycolic Acid, or Alpha Hydroxyl?
YES NO Tumors/ Growth/ Cysts
YES NO Glaucoma
YES NO Lash growth serums (Latisse, etc)
YES NO Difficulty numbing with dental work
YES NO Taking blood thinners such as: Aspirin, Ibuprofen,
Alcohol, Coumadin etc
YES NO Allergic reaction to any medications such as Lidocaine,
Tetracaine, Epinephrine, Dermacaine, Benzyl Alcohol,
Carbopol, Lecithin, Propylene Glycol, Vitamin E,
other _____
YES NO Allergies to metals, food, etc _____
YES NO Any diseases or disorders not listed _____

Please list any medications you are taking _____

I agree that all the above information is true and accurate to the best of my knowledge.

Signed _____ Date _____

Special requests, concerns or remarks for the artist:



Consent and Release Agreement for Permanent Cosmetics

This document is designed to give information needed to make an informed choice of whether or not to undergo a permanent makeup application. If you have any questions, please do not hesitate to ask. Although permanent cosmetic tattooing is effective in most cases, no guarantee can be made that you will benefit from the procedure. This is the process of inserting pigment into the dermal layer of the skin. It is a form of tattooing, and though semi-permanent, it is considered a permanent marking. All instruments that enter the skin or come in contact with body fluids are sealed and/or sterilized before use and disposed of after use. Cross contamination guidelines are strictly adhered to. Generally, the results are exceptional. However, a perfect result is not a realistic expectation. It is usual and advised to book a follow up appointment 6 weeks after healing is completed.

Initially the color will appear more vibrant or darker compared to the end result. Usually within 5-7 days the color will fade 20-50%, soften, and look more natural. The pigment is permanent but will fade over time. Additional color freshen ups will likely be needed within 18 months to 2 years.

Print Name _____

Signature _____ Date _____

Photography Release Consent

We would like your permission to use “before and after” photos for advertising and insurance purposes. Your consent is necessary regarding advertising. Please circle and indicate with your signature for permission to use your photos in advertising.

Yes feel free to use them

No please do not use them

Print Name _____

Signature _____ Date _____

Possible Risks, Hazards or Complications

- Discomfort: There can be minor pain even after the topical anesthetic has been used.
- Infection: Infection is very unusual. The areas treated must be kept clean, and only freshly cleansed hands should touch the areas. See “After Care” instructions.
- Uneven Pigmentation: This can result from poor healing, infection, bleeding, or other causes. Your follow up appointment will likely correct any uneven appearance.
- Asymmetry: Every effort will be made to avoid uneven results. However, our faces are not naturally symmetrical, so adjustments may be necessary at the follow up appointment.
- Eye Exposure: There is a slight risk of eye injury when an eyeliner procedure is performed. Drops may be used to cleanse and flush the eye when necessary.
- Excessive Swelling or Bruising: Some bruising or swelling is possible. Ice packs may help. This typically disappears in 1-5 days.
- Anesthesia: Topical anesthetics are used to numb the area. Lidocaine, Prilocaine, Benzocaine, Tetracaine, and Epinephrine cream or gel are typically used. If you are allergic to any of these, please inform the artist prior to the procedure.
- MRI: Because pigments used in permanent cosmetic procedures contain inert oxides, a low level magnet may be required if you need to be scanned by an MRI machine. You must inform your MRI technician of any tattoos or permanent cosmetics.
- Allergic Reaction: Although unusual, there is always a slight possibility of an unknown allergy to the pigment and other materials used during the procedure.

Consent and release for procedure performed:

Signature _____ Date _____



Statement of Consent and Recitals

Please read and initial all lines

_____ Aftercare instructions have been explained to me, and a written copy will be given to me to retain in my possession. I will follow to them to the best of my ability. If I have questions, I will call or email the salon.

_____ I understand that a certain amount of discomfort may be associated with this procedure, and that swelling, redness and bruising might occur.

_____ I understand that Retin A, Renova, Alpha Hydroxy, and Glycolic Acids must not be used on treated areas. They will alter the color and cause premature exfoliation of the pigment.

_____ I understand that tanning beds, pools, some skin care products and medications can affect my permanent makeup.

_____ I understand that successful color saturation may NOT be guaranteed due to hidden scar tissue.

_____ I will tell all skin care professionals or medical personnel about my permanent makeup procedures, particularly if I am scheduled for an MRI.

_____ I accept the responsibility to explain to the artist my desire for specific color, shape, and position for any procedure done.

_____ I understand that implanted pigment color can change slightly or fade over time due to circumstances beyond control. I can maintain the color with future sessions.

_____ I acknowledge that the proposed procedure(s) involve inherent risks and have the possibility of complications during and/or following the procedure(s) such as infection, misplaced pigment, poor color retention, hyper-pigmentation and bleeding.

_____ I have been advised that a 6 week follow up session is highly recommended to make any adjustments to shape and color, or to fill in any areas that pigment may have had poor retention.

_____ I have been quoted the cost of today's appointment. There will be no refunds for this elective procedure. I certify that I have read the contents of this document. I understand the risks involved in this procedure. I have had the opportunity to ask questions and all have been answered. I acknowledge that I have reviewed and approved the material given to me, and I authorize the artist from **BLINK LASH STUDIO** to perform the procedure agreed upon.

Procedure _____

Signature _____ Date _____

Artist's Signature _____ Date _____



DEPOSIT AGREEMENT

The appointment reservation deposit:

*is nonrefundable

*is required in order to book an appointment

The appointment reservation deposit will be forfeited if the appointment is not rescheduled at least 7 days in advance, except in the event of unforeseen, hazardous travel conditions.

An initial consultation is required for ALL clients before scheduling an appointment.

Signature: _____ Date: _____





PRE-CARE GUIDELINES FOR PERMANENT EYELINER

To get the best results and color retention out of your permanent makeup, please follow these instructions:

- Avoid heavy workouts 24 hours before procedure.
- Limit alcohol and caffeine 48 hours before procedure.
- Avoid sun and tanning one week prior to procedure and do not arrive with a sunburn.
- Refrain from taking (if possible): aspirin, Niacin, Vitamin E, Vitamin C or Advil (ibuprofen), fish oil, Primrose Oil, prenatal vitamins, hair, skin, nail supplements 48 hours before procedure as these all thin the blood. Baby aspirin (80 mg) may be taken.
- Discontinue Retin-A, and Alpha Hydroxy Acid (AHA) near your eye area 2 weeks prior to procedure.
- Do not dye, perm or use an eyelash curler for 2 weeks prior to procedure.
- Please **DO** wear your eye makeup on the day of the procedure so we can get an idea of your personal style and preferences.
- Eyelash extensions must be removed prior to coming in for your permanent eyeliner appointment.
- If you have had any type of eye surgery, including cataract, Lasik, or blepharoplasty, you must consult your physician and receive clearance. This is because there is slight pressure on the eye during the procedure.
- Stop using Latisse or any other lash growth serum at least 4 weeks prior to procedure.
- If taking antibiotics, you should wait one month.
- If you wear contacts, please do not wear them to your appointment and refrain from wearing them if your eyes feel irritated in the following few days.
- *Please Note: You will be more sensitive during your menstrual cycle.*



Permanent Eyeliner After Care

Day 1 (Day of the procedure)

Wash hands thoroughly before touching the treated area. You can ice the eyes by applying it over a clean cloth. Do not apply ice directly on skin. Before bed dab gently with the provided cleanser. Blot your new procedure frequently upon leaving the Studio. Continue until the weeping lymph has subsided. The following three days, blot the area periodically throughout the day. If the eyes are swollen you may take acetaminophen

Day 2-7

The eyes may be swollen the day after the procedure. It is a normal reaction. Some clients swell more than others. The swelling should start going down during Day 2, and the eyes should be looking better by the end of the day. Twice daily, gently wash with water only. You may use a cotton swab. Be sure to wash hands beforehand. It should be treated as an open wound. Let air dry completely. Apply a rice grain amount of the healing ointment that has been provided.

Day 1 through Day 7 or even longer (until the scabs are completely gone). No eye makeup! Avoid hot, steamy showers, excessive sweating, saunas, swimming, sunbathing, facials. Do not use contacts for two days. Do not use Visine. Use only natural tears type eyedrops when needed. Do not peel or pick the scabs at all (it may pull the pigment out and can cause scarring). If itching occurs, use a cotton swab to gently apply pressure. No scratching.

The area will start to flake like dry skin. Let this fall off as naturally as possible. Some spots will appear lighter than others due to the dryness. Permanent eyeliner is a layering process. We will touch up any unevenness at your follow up.

During the 4 weeks after the procedure, it is best to not use creams that contain acids or ingredients that will lighten or exfoliate the skin.

The follow up is best done 6-8 weeks later allowing ample time for healing.